GOUT, RHEUMATISM,

AND

SCIATICA.

BY

EDWIN PAYNE, M.D.



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A PRACTICAL POPULAR TREATISE.

BY

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"*Ut verum dicam imperat mens ipsa mea.*"

LONDON:

HENRY RENSHAW, 356, STRAND.

1876.

LONDON:

BARRETT, SONS AND CO., PRINTERS,

SEETHING LANE.

INTRODUCTION.

"MAN, know thyself, all wisdom centres there." Of all the parts of man's nature, you will commonly find that people understand least and ill-use most their physical nature; they eat and drink carelessly, they over-work, and they under-exercise, and they swallow *drugs* most carelessly, and are especially more willing to swallow them when recommended by *quackery*, whether that be at the hand of an amateur practitioner, or through the vendor of patent medicines having a Government stamp on the box or bottle, which stamp, by-the-bye, is no guarantee that the article sold is beneficial, or fit for the purpose in view. Granting stamps for patent medicines is merely one of the ways which Government adopts to raise money. I have met with people who have thought that the stamp was an evidence of the kind guardian care of a paternal Government,

and that thus a strong arm was placed round them for their safety with regard to their health; the Government professes nothing of the kind.

If people, broadly, knew more about their bodies and the laws of health, there would be less of suffering and trouble, more happiness, more success, less of early dying, *no quackery;* Physicians would be able to save many lives and much health which are now lost and tampered with. How often do patients come to us in advanced stages of illness and incurable conditions who, they had not lost valuable time at first by listening to ignorant but officious quackery, might have been restored! This applies with equal force to rich and poor; there are very many amongst the rich who both favour and suffer greatly from quackery, and die before they need do so.

A great many people suffer from the complaints noted on the title page of this little *book; if they* will kindly study the remarks *made in these* few pages it may be that

they will understand better the nature of their ailments, and how rationally to deal with them; and it may be they will be very glad to find that they will be saved from the many perils of *quackery* themselves, and also able to warn others. Dr. Arnold, of Rugby, used to say he preferred that the elements of knowledge should be taught by University men, because a thoroughly educated man would teach even the *elements* better than a man not so well educated. If patients would ask the advice of the Physician when they themselves think "it is only a cold," or they are "only a little out of sorts," or "rather over-tired for a few days," they would often find he could deal with the *elementary* stage of disease in a manner most advantageous to them. It is often in the beginning, the seemingly simple form, that cure can be started. Two consultations with a Physician at the commencement of illness have frequently saved not only health, but life. It is then that irreme-*diable damage* is done by those who deceive

the public by prescribing for them—and frequently, indeed, as amateurs—though they have not studied *disease*, and merely know something about drugs. It is a feature of the times in matters medical for people to conclude that a knowledge of *drugs* is necessarily associated with a knowledge of *disease*. and its treatment. Equally true and valuable would it be in its results if, when wishing to match a ribbon for colour, you were to go to one who was colour-blind. A celebrated Physician has made the following remarks:—

"I was one of three who met in consultation concerning a case of apoplexy. In the opinion of one of my colleagues and myself, the only treatment to be adopted was as follows:—to place the patient in the recumbent position with head and shoulders raised, to enforce absolute rest, to keep the bowels so far loose as to prevent excitement and straining; to apply cooling substances to the head in the event of any heat of the part occurring; to support the patient with light nutritive food, having regard to his habits. The third gentleman protested against the modern system of doing nothing, he was anxious to bleed, to purge, *to blister; and,* when opposed, was not sparing of *the word "sceptic,"* &c.

"Now the difference of opinion in this case was not due to scepticism on the one side and justifiable faith, *i.e.* faith justified by knowledge, on the other, but to knowledge on the one side, and absence of knowledge on the other.

"The case was one of degenerative change, retrograde metamorphosis, of the arteries: one had become so rotten that its wall had given way, its contents had escaped, a clot had formed, and by its mechanical effects had given rise to the symptoms. The heart shared in the degenerative changes, the bleeding had ceased. To those who understood the real nature of the case, the lesions present, and the mode in which they had been produced—in short the pathology of the case—belief in the efficacy of so-called active treatment appeared to be not merely unjustifiable faith, foundationless faith, faith without knowledge, but to be faith in opposition to knowledge, which in Medicine is the worst form of scepticism, inasmuch as it is doubt of truth and belief in error—doubt which may prevent the saving of life, and belief which, embodied in practice, may kill."

Without doubt, mere statements of complaint cannot, alone, guide to sound treatment, but a knowledge of pathology and *post mortem* conditions is also absolutely *necessary;* and it is impossible that every

individual in the community can devote either the necessary time or money to the study of medical science, and so the community must fall back upon the services of those who do devote the necessary time, talent, and money to this object; and I will say this much, that without Physicians to ameliorate and prevent disease, all communities would find themselves seriously weakened.

A word to the wise is enough. Don't trifle with health; you can do nothing without it, either individually or collectively; you can do much with it. Be very careful as to whom you entrust with it, and especially when you *begin* to lose it; that is the time for the careful, well-tested mind of the qualified Physician to deal with the matter, and not when the *pretender* has spoilt the opportunity. It is quite time that, in the public interest, quackery should be stopped.

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RHEUMATISM AND GOUT

GENERALLY CONSIDERED.

Rheumatism and gout are not new diseases; we find traces of them in all times. They are very painful complaints, and rheumatism is also attended with very serious consequences which may follow on after the immediate attack has ceased, and it therefore must not be trifled with at all. This is very important to note. The serious after-affects, from neglect during the early stages, especially with reference to the heart, have forced themselves upon my attention when examining patients suffering from chest disease, and I especially warn the reader upon this point of heart-disease.

Now a person complains of having shivered, and then, afterwards, of having pains

in different parts of the body, also of nausea, and perhaps vomiting; then, after this, a feeling of feverishness ensues, and very severe pain in the joints especially is complained of, which is much increased upon any attempt to move; the perspiration is very sour-smelling, and the water passed is thick and of a high colour. Now here we will stop for a moment, and, granting that we are dealing with rheumatism, I will ask, "How did this person arrive at this condition of ill-health? Here is an effect —what is *the* cause? Is it cold?" No, cold is not a constant or sole cause at work in cases of rheumatism; it may have been an exciting cause, and cold and damp are to be regarded as exciting causes, but there is a deeper cause for rheumatism in *mal-nutrition*, *mal-assimilation*, and *mal-excretion*. Now, to explain this a little further:—We will consider what is meant by nutrition, assimilation, and excretion, and regard the prefix *mal* as meaning imperfectly performed.

When solid food is taken into the mouth it is broken down by the action of the teeth, jaws, tongue, lips, and cheeks, and thus mingled with the saliva, which is a very important juice, containing a special principle—ptyaline having a power of acting upon starchy matter, and altering its condition and changing it into dextrine and glucose; and here observe that even those who may have lost their teeth, if they will, previously to eating it, cut up their food finely, and mix it well with the saliva, may secure the healthy advantages of this first process. It may be a matter of interest to know that saliva is a mixed fluid originating from three sources; the first set of glands producing a liquid fluid; the second set a more gelatinous fluid, which is connected with the sense of taste: and the third set provide a material which surrounds the bolus externally, and aids it more easily in passing from the mouth into the food-pipe (œsophagus). About three pounds and a half of saliva are secreted

daily. Nature does not do this for nothing, hence see the importance of using this fluid in mastication when taking food.

The food now passes down into the stomach—a bag in which it is further subjected to trituration, and the solvent action of the gastric juice. This juice is very important, and as much as fourteen pints are secreted daily. It contains a peculiar principle called *pepsine*, and has a peculiar solvent power on the albuminous part of food, as well as upon gelatine and glutin ; it has not much action on fatty matter. From the stomach the altered food passes, in a fluid form (called chyme), into the first portion of the bowel or intestine—called the duodenum ; here it meets with the bile and the pancreatic juice, the first being secreted by the liver, and the second by the pancreas ; the pancreatic juice is alkaline and albuminous in its nature, and operates on the fatty substances which escaped unaltered from the stomach ; the pancreatic

juice is also important, in that it changes starchy matters into sugar within the intestine. About three and a half pounds of bile are secreted within the twenty-four hours, and about half a pound of the pancreatic juice; important quantities of material these, and it can be understood that a failure in the function of either liver or pancreas is of great importance in reference to healthy nutrition. There is also another half-pound of another digestive or assimilating juice secreted by other intestinal glands, making in all the large amount of twenty-two pounds daily of digestive juices, which are designed to dissolve and act chemically on the aliment. Shall complex arrangement of this kind be carelessly dealt with by the hap-hazard administration of a quack pill or mixture, or some other compound selected without previous study? The aliment being mixed with these several solvents, is not allowed merely to remain quiet in the intestine, but

there is provision made to move it on by a peculiar motion called peristaltic, and so it is intimately mixed with the different secretions. Now, for perfect digestion and assimilation, these various processes must be working in balance, and assisting one another.

From the inner surface of the bowel this fluid alimentary matter (chyme) is taken up into the chyle ducts, and from these it is conveyed to the lymphatic glands, which consist of pouches or sacs surrounded by a firm fibrous membrane richly supplied by blood-vessels; these are connected by lacteals, which ultimately terminate in the thoracic duct. Important changes take place in the chyle while passing through the lymphatic glands; whilst in them the molecular fluid, examined microscopically, shows naked nuclei, which resist the action of acetic acid. After passing from the glands if the fluid be examined it will be found

to contain flattened nuclei, which in every point except colour closely resemble the blood corpuscles. Chylification and the formation of the elementary blood are most importantly influenced by the lymphatic glands; the blood-corpuscles are formed in them, and then carried by the thoracic duct into the circulation at a point not far from the right side of the heart; from thence they pass into the lungs, and there they assume blood-colour, and become the coloured corpuscles of the blood by the action of the oxygen of the air in the lungs. This, then, is, so far, an outline of how the food is made into blood, but there are other important glandular bodies which we have not mentioned, which are also concerned in forming healthy blood—the spleen, thymus, thyroid, and supra-renal bodies.

The lungs must be in a healthy condition, so that a proper quantity of blood may be aërated by them for the supply of the

wants of the body, to replenish the waste that is going on in the very act of living; and if a large portion of lung-structure has been rendered inefficient for this purpose by such diseases as pneumonia, or consumption, which have been allowed to run riot—either by total neglect in their first stages, or imperfect treatment at that *early* period when so much can be done, or even by further neglecting to aid in clearing up thickenings and deposits which have remained after the immediately acute stages have passed by,—if, I say, large portions of lung have thus been rendered inefficient for good service, then repair and nutrition must suffer, and the individual be more or less weakly. For you start life with organs constructed to act in healthy proportion—upsetting this balance of construction must result in ill-health. Persons often say they take a great deal of exercise in the house, running up and down stairs. *Yes, so* they may; but where do they get

their *fresh* air from? Exercise should be taken in the open air to be worth the name.

The blood is a compound fluid, and having been repaired, so to say, and made fit again for the purposes of nutrition, we find it in the left venticle of the heart ready to start on its round, containing in it the elements of the various structures of which the body is so wonderfully composed. There, in the left ventricle of the heart is the fluid which, as it arrives at the different tissues, as it were at so many stations on its way, will part with cartilage material to cartilage, muscle material to muscle, tendon material to tendon, brain material to brain, not interchanging them wrongly, but by a wonderful selective power yielding up each to each what each requires. Again let me ask, as you get further into this wonderful and marvellous arcana, Are you more or less contented to trust the unravelling of anything "gone *wrong* in the system," to those inefficient in analysing

and synthesising power, or to those who are more or less uninformed, and merely dogmatic? Watches are not entrusted for repair to the blind, or to those who have not studied their formation; why do men trust their bodies to such? Merely, I believe, oftentimes, because they don't know so much about the works of their bodies as they do about the works of their watches. Those who have not looked *inside* the watch-case, are the people to *shake* the watch, or give it a blow to make it go on, or add some of the wrong kind of oil, which only still further clogs the machinery which, on the contrary, requires cleaning, and that strained parts be adjusted first by the skilled workman, and then the application of the *proper kind* of oil. There must be no sledge-hammerman entrusted to repair the watch, but the man with the keen practised eye, and a knowledge of the inner relative working of parts, and how one part out of gear may upset other parts; and possessing the gentle,

steady hand, with its fine and natty touch must be there. Apply this to the treatment of the disordered body, and much irreparable mischief will be avoided.

Well, the blood has gone its round, and completed its circuit through the frame in the space of half a minute, carrying with it repairing material, and receiving worn-out material; what becomes of this worn-out material? It is important for purposes of health that good healthy blood be formed, and it is equally necessary that it be kept pure, and free from noxious and foreign matter. By the process of *mal*-assimilation inferior blood may be formed, and noxious material imported, and from the natural wear and tear of the body worn-out material results, and is taken up by the blood; and by *mal*-excretion, material may be retained which ought not to be, and thus ill-health and suffering may ensue.

We will now attend to this very important matter of *excretion*. There is a process

called the secondary digestion, which consists in the gradual breaking-down of our own tissues—the primary digestion may be said to consist in the building-up of our tissues — such broken-down tissues being absorbed into the blood, and then, finally, discharged from the system. And, first, this discharge of used-up material is effected by the lungs, from which it is thrown off in the form of carbonic acid and watery vapour. Second, by the liver, in the form of what may be called hydro-carbon, compounded of fat, bile, and starchy-matter. Third, by the kidneys, in the form of urea and uric acid, water and earthy salts. Fourth, the skin, by which oil, water, and carbonic-acid are excreted. Two thousand eight hundred pores in every square inch to be either in or out of working order must necessarily form a serious item in the important questions of restoring and preserving health; and this appears forcibly in the case of burns or scalds which extend

over a large surface of the body, for these are more serious cases than those in which the burns are deeper, but occupy less surface. Fifth, from the bowels are discharged fatty and earthy matter. Now, if assimilation goes on properly, and if excretion also is fully performed, then there is health, each organ performing its share of work in the economy. Nature works healthily by combined and proportional workings of all parts of the organism. She departs from health in proportion as these organs depute their function to compensatory parts of the organism; and in time these compensatory parts, being proportionally over-worked, will fail, and will then demonstrate that want of balance of function has been the foundation of ill-health.

We asked how it was that the person suffering from rheumatism arrived at that state of ill-health? You will now better understand me when I say that such conditions are not the result of any sudden

cause of yesterday, but that they result rather from the accumulative working together of several causes, resulting in rheumatism in the accumulation of lactic acid in the blood, and in gout in accumulation of urea and uric acid in the blood.

Now we will look a little further at a case of rheumatism, and amongst other symptoms, there is sometimes added pain in the chest, in the region of the heart, and the patient complains greatly of this, and also difficulty of breathing ; in other cases of acute rheumatism the patient makes no complaint at all of any sensation of the kind, and this is one of the points I wish to call your attention to—that although no pain is complained of, yet there may be most serious mischief about the heart, demanding treatment. How is this to be found out? The quack is of no use here. Every physician called to attend a case of rheumatism will "*listen to the heart*," and examine its condition, and will not wait till

the patient complains of any inconvenience there.

I will explain this matter of the heart a little further; it can be made fairly simple for the purpose of understanding the *rationale* of the process of listening to the heart. The heart is a hollow muscle, and for description for the present purpose may be divided into two sides, right and left, and each side may be again represented as divided into two cavities; two of these are receivers of blood, called auricles, and two of them are senders of blood, and called ventricles. There is one auricle and one ventricle on the right side of the heart, and there is one auricle and one ventricle on the left side of the heart, and for diagram purposes you may imagine each auricle to be situated above its ventricle, and between each auricle and its ventricle there is an opening, so that blood coming into the auricle can pass from it into its own ventricle. Now, the right side of the heart

deals with venous blood both in its auricle and in its ventricle, and the left side of the heart deals with arterial blood both in its auricle and in its ventricle. The venous blood is received from all parts of the body by the right auricle, it passes from that cavity to its own right ventricle, it is sent by that ventricle as venous blood into the lungs, where it is changed from venous blood into arterial blood; it then, thus changed, is received by the left-side auricle of the heart, and from that cavity it passes into its own left ventricle. In both of these left-side cavities, it is arterial blood, and it is sent out by the left ventricle as pure arterial blood to nourish the body. Now, between each auricle and ventricle there are valves placed, and at the place of exit from each ventricle there are valves placed, and when the blood has passed from the right auricle into the right ventricle, its return into the auricle not being desired, the valve between the two cavities is closed, and upon the passage of

blood from the right ventricle into the vessel carrying it to the lungs, its return by the same passage not being desired, the valve set at the exit from the right ventricle is closed. Just the same thing happens on the left side of the heart, the valve between the left auricle and the left ventricle is closed to prevent the return of the blood into the auricle after it has passed from it, and the valve so opening at the exit from the left ventricle, is closed after the blood has passed from it; and so the stream pursues a healthy onward course. But suppose the valves mentioned do not perfectly close behind the onward current of blood, what happens then?—a confusion in the onward progress takes place, a part of the blood sent forward goes forward, and part does not, but flows back into the cavity of the heart, from which it was sent out. How can such a condition of the valvular opening arise? In rheumatism it may arise from thickening of the valve-

structure, and deposit on the parts entering into its structure. We will suppose that the valve-structure situated between the left auricle and left ventricle has become affected during an attack of rheumatism (this you may have heard spoken of as mitral valvular disease), the common effect of such disorder of this valve in the first instance is to allow of the back-flow of the blood into the left auricle from the left ventricle. To illustrate this—if you will take a common glass syringe, in which the plugging is not perfectly tight, fill it with water, and proceed to empty it, you will observe that a reflow of water is allowed into that part above the plugging of the piston, the part below the piston may be taken to represent the ventricle of the heart, and the part above may in the same way represent the auricle, only that instead of the valve-structure in the heart acting as the forcing agent, the walls of the ventricle thus act, and the valve-structure

resists the back-flow, but when imperfect, it allows of the back-flow, somewhat in the manner that the imperfectly acting piston of the glass syringe is seen to do; the main point to illustrate is, that they both allow a back-flow—spoken of in medical language as regurgitation, with reference to the valve of the heart. Now, if this regurgitation from the left ventricle continues, what consequence will follow in the train? The whole current of the blood will be impeded in its onward course; thus, the blood in the left auricle, not being able to go forward into the left ventricle, will delay the blood which is ready to come forward from the lungs; the lungs' aërating space being filled, cannot receive blood from the right ventricle; this, again, being filled, will delay the blood which is ready to come forward from the right auricle; this last cavity not being able to receive more blood, the blood coming forward from the body generally will be delayed, and the liver being a great

venous organ will become overfilled, and inconvenienced in its workings, and then, in course of time, dropsy ensues. Of course very much can be done both to prevent all this mischief occurring, and to modify the evil consequences when the valvular mischief has been set up. It has been indeed held, and upon good practical authority, that the mischief produced by rheumatism on the valves of the heart may not be of such a nature as permanently to affect the action of the heart; and there is ground for the opinion that some thickening of and deposit on the valves, may take place, and be afterwards got rid of by absorption. Theoretically, if the heart could be kept quite still, there would be better chance of complete cure being effected, but as this is impossible, we should give as much rest as we may, and this will show the importance of following out the directions which will be given by the physician, that the person who has suffered from rheumatic affec-

tion of the heart should observe quietude, and avoid over-exercise, violent running, walking, rowing, and gymnasticising, as all such over-exercise quickens the action of the heart, and when its valvular structure has become weakened, or disordered, such strain upon it cannot but result in increasing, instead of diminishing, the mischief. However, if persons suffering from disordered heart will ask a physician for proper direction from time to time, and place themselves under the care of such for a while, and not expect to be cured by a nostrum, or by being looked at once only, and taking directions well-fitted for one set of indications as equally well-fitted to relieve and cure an altered state of things—if they will do this, then much can be done for them, and especially if they will go early enough; but if a heart condition is not recognised, or, if recognised, improperly dealt with, or left to go its own way, why then from what has just been said

about it, you can see that bad consequences must follow ?

The reason why the physician listens to the chest to ascertain the condition of the heart is this, that in health and disease there are to be heard at certain points in the chest peculiar and distinctive heart-sounds, which enable him to judge of the kind and extent of mischief present, and also to form an idea of the progress being made towards recovery. It is necessary that his ear should be educated for this purpose, that he should know where to listen for the sounds. I have seen a pretender to such knowledge place the listening-tube (stethoscope) over a spot where no distinctive sound could be heard, and then give his opinion that he found nothing wrong. It is also necessary that the listener should be able to hear. It is on record that a patient suffering with some chest-disease had his chest examined, the opinion pronounced was that "he could not

hear anything wrong." This report being made when by another examiner something wrong had been found, the comment was made that it was no matter of surprise that the first observer "had not found anything wrong," since it was known that he was stone-deaf! This was in the early days of the use of the stethoscope. It is, no doubt also, a great advantage to the ausculator to possess what is termed a musical ear: he will be able to detect finer sounds than another who is not so advantaged.

The condition of valvular disease, which we have just now been considering is the result of what is called *endo*-carditis, the mischief occurring *within* the heart; there is another disordered condition which we may direct your attention to, called *peri*-carditis. The accepted symptoms of pericarditis are the following:—There is a peculiar expression of countenance indicative of distress, or alarm; frequently there will also be pulsation within the chest, a sense of oppression at

the stomach, catching breathing, dry cough; the patient cannot lie on the left side; there is pain complained of in the region of the heart, and this is increased by taking a deep breath; there is stiffness and pain about the left shoulder, and sometimes down the left arm. Sometimes there is delirium. There is also fever. To these are to be added the auscultatory and percussion sounds.

The heart is covered by a membrane called pericardium; a portion of this membrane is in close contact with the heart, and it is folded back upon itself; it is a closed sac, and the internal surfaces forming the walls of the cavity can slide upon one another, and this *sliding* actually takes place with the motion of the heart, when the heart beats. The pericardium is a serous membrane, and is prone, if inflamed, to contract adhesions. Inflammation of the pericardium results variously. There may be partial or complete adhesion of the two surfaces, and when

there is a considerable amount of lymph—a product of inflammatory action, thrown out between the two surfaces—there is a most peculiar honey-comb appearance produced upon the two surfaces, which has been compared variously for purposes of description, of which comparisons, perhaps, the best is that which likens it to the rough side of tripe. Sometimes, also, a fluid is effused or poured out between the two opposed surfaces, and this will separate them, and inconvenience the action of the heart, and, if excessive in amount, must result in death. Now, one important fact to remember is, that the heart cannot stop beating without life ceasing, and, this being the case, constant friction keeping up the inflammatory action, though there may be a very considerable absorption of the lymph thrown out in pericarditis, yet it cannot be and is not wholly removed, but in some cases you find partial adhesions, and in some complete adhesions of the pericar-

dium to the heart. Hence if such serious consequences can result, the greater the necessity of early care in the elementary stage of the disorder. People can live a long time after pericarditis, but of course the probability of lengthened life is increased by having proper care taken at as early a period as possible, and according to the condition found upon careful examination, so following out points of care and regimen in proportion to the seriousness of the indications present. When any one's heart is out of order it is better to know the fact and live in accordance with the condition present.

Some other results of rheumatism may be briefly referred to, such as *dropsy*, embolism, and delirium.

The first of these, dropsy, is an after-effect; in these cases, associated as they are with heart disease, the circulation being delayed, fluid passes out into what is termed the areolar tissue, or connective tissue, and also

into the cavities of the body, such as the pleura, then by degrees the spaces which ought to be free are filled with fluid, and so the lungs and heart especially are incommoded, and life must in consequence cease.

Embolism is one of the consequences of endo-carditis; the fibrinous collections which are deposited on the roughened edges of the valves of the heart may be washed away into the blood-stream, and in their course may block up an artery, and so interfere with the blood-supply to a part, or an organ; for instance, the liver, the spleen, or the brain; and if one of the brain-arteries become blocked, it may be readily understood that paralysis, or death even, may result from so vitally important an organ being interfered with.

Delirium occurs sometimes in consequence of inflammation of the heart in rheumatism, without the brain or its membranes being inflamed, and the treatment

must be specially directed to the heart condition.

Another prominent result of rheumatism is *affection of the joints*—rheumatic arthritis. In the acute form of rheumatism, of which we have already spoken, the affection of the joints appears to be of a comparatively transitory nature; the joints are affected in succession, and as one joint improves, another gets bad; but the form of articular rheumatism which is now referred to is of a different kind in this respect,—that the joint affection is not so transitory, it may develop from the previous acute form after it has run its course in some other of the joints; for it is then, sometimes, found that one or two of them remain affected, and do not return to their full healthy condition. But it is not necessarily preceded by acute rheumatism, it may appear in what is known as the chronic form in the commencement; it may also be congenital, that is, a person may be

born with a constitutional predisposition to it. It is met with in those who have had previous attacks of acute rheumatism. The most frequent exciting cause is cold, or cold and damp. By it the several structures, the synovial capsules, and ligaments, and cartilages, entering into the formation of the joint, are disorganised.

Persons affected with chronic articular rheumatism will, in some cases, experience pain in, perhaps, a single joint, for either months or years, and this pain is increased by moving the joint; and at night, also, there will be pain in the joint; occasionally the joints are swollen, and in this case the swelling depends upon effusion within the joint; but swelling is not a constant, or necessary, sign of the mischief going on, there may be very little effusion into the joint.

In some cases persons affected with this form of rheumatism will have a series of short attacks of acute rheumatism, in which

the same joints will be affected; they feel every change of the weather, and sometimes one joint worries them, and sometimes another; there may be slight swelling, great sensitiveness, but on movement the pain is very great; there are also signs of fever, a quick pulse, increased perspiration, thick urine, and the person becomes thinner. This form of rheumatism is very tedious of cure, and patients also suffer from muscular rheumatism conjointly with it. Treatment, however, will modify the mischief, keep the enemy at bay, and tend to increase comfort.

There is another form of articular rheumatism, in which not only the capsule of the joint, and its ligaments, are chronically affected, but in which the cartilages and surfaces of bone in the joint become disordered, and this condition cannot always be traced to the effect of cold and damp. It does not prominently occur amongst young people, but generally is met with between

the ages of twenty and forty. Women suffer more frequently than men. It exists indepently of acute rheumatism, and progresses gradually ; it will sometimes stop in its progress. In the beginning the patient suffers from pain, but this is not always acute, indeed usually it is slight ; it is increased by pressure and movement ; the colour of the skin is natural, but the joint seems thicker. Any of the joints, and even the spinal column, may be attacked by this form of rheumatism ; generally both sides of the body are affected at the same time. Flexings of fingers may be observed, so that they lie over each other. In many such cases persons live to a good old age.

There is yet another form of rheumatism besides these in which the joints are affected, and this may be called *muscular* rheumatism. This form is, however, frequently associated with articular rheumatism ; the exciting causes appear to be cold

and over-exertion of the muscles. A person suffering with this form of rheumatism complains of a peculiar tearing and stretching pain, and moving the part increases it, but steady pressure appears to relieve it. There is no change in the colour or heat of the skin, and the person suffers more towards night: cold and damp increase it, but dry warmth improves the condition, but not necessarily the warmth of the bed; sometimes, also, the pain wanders, and sometimes it remains fixed. There are acute and chronic forms of muscular rheumatism. Rheumatism of this kind has received various names, according as different sets of muscles may have been attacked by it; sometimes the muscles of the neck have been very painfully affected by it, and at others those of the chest, rendering coughing and sneezing, and even breathing, exceedingly painful, and thus a point has arisen as to whether there might not be lung, or pleura affected, when the real mischief has

been situated in the muscular structure. Rheumatism of this kind very frequently affects the back and the shoulders. Lumbago is another name applied to it when it attacks the lumbar muscles ; this will come on very suddenly, and the movements of rising up or sitting down are, in a few minutes, rendered most painful.

Now, these are the principal forms of rheumatism, and for the relief of the patient much can be done ; but, as previously noted, the cause is more deeply seated than in cold and damp, and is really rooted in mal-assimilation and mal-excretion ; the treatment must necessarily be varied, and will require to be modified by a trained judgment. As an outline of the most successful treatment which can be adopted, and especially until proper medical superintendence can be obtained for the acute form, in the case of an adult, for the first twelve or twenty-four hours, at intervals of three or four hours, a draught

may be given composed of forty grains of bicarbonate of potash, in two ounces of water, made to effervesce slightly by adding to it a powder of ten or twelve grains of citric acid. A pill also may given at the commencement, so as to clear the bowel. This may consist of four grains of powdered scammony, and four grains of the compound colocynth pill; or a half-ounce dose of castor-oil may be given; but purgatives in this disorder should be given early, so as to disturb the patient as little as possible afterwards, on account of the agony caused by moving. Colchicum is better avoided, unless given under medical direction. If the perspiration be scanty, a vapour bath may be used, and this may be easily extemporised by placing a vessel of boiling water under the coverings of the patient, and keeping up the vapour by means of hot bricks being put in from time to time; care also being taken not to *throw* the vessel over, thus scalding a help-

less and suffering person. For the painful joints, the best domestic remedy is to wrap them in plenty of cotton-wool, over which may be placed either gutta-percha or oiled silk.

What shall I say about the inflammation of the heart, which is so vitally important, as I have previously explained?

Well, if the patient is seized with palpitation, oppression of the breathing, and a sense of inconvenience in the region of the heart, do not wait for a sense of pain to be complained of, but put on twelve or eighteen leeches over the region of the heart; and a pill containing half a grain of opium may be given every four hours for three or four times; perfect quiet should be observed. For diet, light mutton-broth is as good as any to commence with.

It will be evident to any sensible person that to say more than this, upon the treatment of so vitally important a disease as acute rheumatism, would be almost useless,

but by adopting such measures in the very beginning, and for, say, twenty-four hours, much valuable time may be gained while sending for efficient medical aid, which the patient ought always to have the advantage of in so serious, and possibly vitally mischievous, a disorder. To those who suffer from the more chronic kinds of rheumatism, whatever form it may take, if they ask my honest advice, it is by all means in such a complicated disorder, for such it really is—rheumatism, consisting, as it does, in mal-assimilation, and mal-excretion, as previously explained, is not a simple matter — I say, then, my advice is to place themselves under the care of one qualified to take proper charge of their case, and not to waste their time, health, and money, upon quacks, or nostrums, or patent medicines of any kind whatever. If any one reading these pages will not be contented unless I mention a

remedy, then—at the same time doing it under protest almost—I will suggest that, as a rule, iodide of potassium in three grain doses, with an ounce and a half of infusion of either gentian, calumba, or quassia, twice or three times a day, may be *tried*, and a simple compound rhubarb pill may be taken. But, sincerely, I think what I have said previously about the really complicated nature of rheumatism will satisfy any sensible person that it is not possible to say much more about treatment as suitable to any individual case; in fact, each one must be dealt with according to its own peculiarities and changes. Because the treatment prescribed to-day is suited to the condition of organism present to-day, it does not follow that it will be proper to continue it without some modification. Nor is the treatment of a few days ago necessarily bad because it is changed to-day; it has advanced you effi-

ciently a stage towards health, but is unable to advance you further; the good it has accomplished is not the less because it cannot accomplish more; it has done much in advancing you a stage nearer health.

Locally, again, as a rule, painting the affected joint with iodine paint is a useful thing to do, and rest is also essential. Malt liquor, port wine, and sugar, are better avoided by those prone to rheumatism. They should adopt warm clothing, and take exercise in the open air, and also use bathing, but not to excess, or prostration, and especially should such persons be on guard against the excessive use of what are called Turkish baths. Wearing laced knee-caps, which can be made sufficiently strong to support, and in a measure confine, excessive motion in the knee-joint, is also a useful measure in conjunction with others, for the relief of those who suffer with rheumatic affections

of the knees. But, of course, in more serious forms of chronic rheumatic arthritis, splints, and dressings and blisters are essential measures, and *must* be superintended by the physician.

GOUT.

GOUT and rheumatism appear to be very closely allied, indeed they have been said to be first-cousins. But gout is a peculiar disease, although in old-standing cases there is a strong resemblance to rheumatism; but there is something special in the commencement of gout. An acid, called uric-acid, is largely formed in the blood of gouty persons; here again we have to recognise the mal-assimilation and mal-excretion previously referred to as foundation-causes at work in gout. Hereditary tendency is a most, if not the most, important agent in setting-up gout. Exciting causes easily affect those who have some hereditary tendency to gout.

Men are mostly affected with this disorder, women rarely, and it is said not to occur during childhood. With reference to age, it generally occurs after the thirtieth year; in these points gout rather materially differs from rheumatism. It also affects the rich rather than the poor. Repletion, taking in more supplies than the system requires, over-loading and upsetting the balances between waste and repair, and disturbing the processes of assimilation and excretion referred to in the beginning of this little book, are fruitful sources of gout in those predisposed to it. The best explanation of this complaint at the present time is that which traces it to an anomaly of nutrition, in which an excess of uric-acid is produced: if this excess is got rid of, well and good; but if not, the person suffers. This implies the necessity of the kidneys doing their work well, and also a care directed to the other point, that the occasion for their excessive work shall be obviated, and thus their struc-

ture shall be preserved for good service for a long life; for if any organ be over-worked, it will break down before its time, and we cannot live without kidneys, any more than we can live without a heart or a liver.

Gouty people have generally in the beginning a great tendency to become fat, and they ofter suffer from piles. They also feel languid, and sleep badly; the appetite is not good, and they suffer from some form of indigestion; they also frequently have palpitation of the heart, and oppression of the chest; they perspire considerably; the urine is frequently passed, and is high in colour. These symptoms last an uncertain time, and then comes the outburst:—the patient awakes suddenly in the night, with a most agonising, torturing, piercing, hot pain in the great toe. This unbearable pain has been described as if the joint of the toe affected were being relentlessly screwed up in a vice, and the patient is in most agonising torture, and the pain is so great

as to cause the whole body to tremble, the parts about the joint begin to swell and get red, and there is fever, with a bounding pulse, great thirst, high-coloured urine, dry skin, and he is much excited. Towards the morning he gets better, through the day his state is tolerable, but still he suffers, and the ball of the great toe is more swollen, very red and shining, and the whole of the leg may be a little swollen. Then, as night comes on, the severity of the suffering increases again, and thus, for perhaps a week, he will have comparatively quiet days but bad nights. In after attacks the period is lengthened somewhat; as a rule, in the first attack, the patient is free from his trouble in about a week, the condition of the great toe gradually improves, and what is termed desquamation of the cuticle takes place; that is the worn-out skin of the great toe peels off. There is no deformity left from the first attack, as a general rule, and it is generally confined

to the region of the great toe. He now (having recovered from the pain and the sleepless nights) feels better than he did before the attack. But here let me remind you that no one is ever really better for any illness—*relatively* the condition of health may be better after the illness is over than during the "sickening" for an illness, or than during the full height of the illness—but *positively* the organism would have been less broken down if illness had never accrued. It is a good thing to be as little ill as possible. It is well to modify and shorten illness, and save the various tissues of the several organs from being "used up," and so leaving less to prolong life with. Every illness "ages" a man; it expends his health-*capital;* and the commercial motto applies here—"Cut short your losses."

Well, our patient may be said to be *relatively* better than he was, but *positively* worse; and it is by inducing people to be-

lieve that they are no worse for a fit of the gout, and that they can always have a cure at hand, that *quackery*—in its several forms of pills, patent medicines, amateur advice, and prescription of treatment by those who have not studied *disease*—is so very mischievous; much life is sacrificed which ought to be saved, and much suffering endured which need never arise. If the pain and suffering of the first attack were not so soon forgotten, and not so misconstrued, the first attack of gout would often be the last; and if the advice of the physician, directed to the individual weak points of the case, were trusted and followed, instead of the advice with the *nostrum* of some foolish form of *quackery*, it would often be so; but, instead of that, we find the superior advice is put on the one side, and the inferior plan is adopted, one would suppose upon the very *rational* conclusion that the less any one studies a subject the more he knows about it; and the more carefully he studies a subject,

the less he is likely to know about it. The impertinence of *quackery* is really something sublime—ridiculous, also, when you think about it for a moment. The usual rule is, that the first attack of gout is followed by a second, and this by a third, and so on. At first there may be an interval of a year between the attacks, but generally the intervals are shortened, and there are several attacks in a year.

Chronic gout is that form in which there are premonitory symptoms, and especially those of indigestion. There is not much fever, and the pain is much less than in the acute form, but the person suffers for weeks or months at a time, and the disorder is not confined to one joint, but several joints are attacked, either in succession or at the same time. It is in this form chiefly that the "chalk-stones" are met with. The swelling and the redness develop more slowly, and the redness is not so intense, and the swelling is more diffused. After

the attack is over, the swelling still remains and a hard tophus is left behind, and after repeated attacks this increases by new deposits. The mischief done by the irritation of these deposits within the joints after a time becomes considerable, and interferes with the movement, and causes deformity of the affected joints, and the usefulness of the arms and hands is impaired. In some cases inflammation is set up, and abscesses form about the joints. The patient becomes very infirm, the digestion fails, there is acidity of the stomach, flatulence, irregular action of the bowels, the circulation is disturbed, and there is great irritability of temper. An insidious fever, which can be recognised by the thermometer, accompanies chronic gout.

Acute gout, as a rule, has preceded chronic gout; but cases do occur where this is not the case, and the chronic form is the primary form.

Atonic gout is another recognised form,

in which the organism is so debilitated that a normal attack of gout cannot be developed. Sometimes, after a person has had acute gout, there is a permanent condition of ill-health, in which the patient suffers from general over-sensitiveness, loss of muscular power, indigestion, perspiration, and thick cloudy urine; pains in one or more joints of a very severe character, and these symptoms will become exaggerated often without any perceptible cause, and at other times appear to be associated with the slightest errors in diet, little changes of weather, or exposure to cold; and there is only slight redness, very little swelling, and both disappear after a few hours. Occasionally a person so suffering will have inter-current attacks of acute gout. Anti-rheumatic treatment is of no use in these cases, and it is necessary to make out the distinctive gout character in order to guide to a correct treatment.

Clinical experience proves that gout will

affect internal organs, such as the stomach, heart, and lungs, and there are cases of "angina," which have had a marked association with gout. Brain-troubles have also been noticed, which have, without doubt, been associated with gout; and I remember one well-marked case of this in my own practice, where the membranes of the brain were affected in an aged lady. The attack cleared up under a carefully-adapted dose or two of colchicum, and in describing her recovery she told me the pain in the head seemed gradually to sweep away like a mist removing from land. She had suffered very much from gout, and very reluctantly took the colchicum, but consented to do so upon my explaining the mode of adminstration, which struck her as so insignificant in quantity that she thought it could not possibly hurt her. Much may be done by *judiciously* administering well-known but much abused drugs; but the skill consists in matching the relieving agent to the *indivi-*

dual condition. There are shadings in treatment, and oftentimes it is with conducting a case of illness successfully as it is with a boy trundling his hoop—gentle taps help the hoop, but knock-down blows make the hoop waver, and the result is a downfall! Much judgment is required in conducting a case of illness to a successful issue, and more than can possibly be possessed by those who have not regularly studied *disease.*

The organs most frequently attacked by gout are the stomach, brain, and heart. Gout in the stomach is marked by severe pain in the region of that organ, and in some cases vomiting and bringing up blood are associated with it. Gout in the brain is sometimes marked by headaches, dizziness and vomiting. Gout in the heart is associated with weak and irregular action of the heart, and difficult or oppressed breathing, fainting, and disturbed circulation. *Asthmatic* attacks have been found to have

both gout and rheumatism as their basis, and of such cases I have met with numerous examples both in my private and my hospital practice; also cases of bronchitis having a rheumatic, or gouty association, and which would not yield to treatment short of that for rheumatism or gout. Gout is a tedious disease, but very much can be done for those who suffer from it. Death is a rare termination of gout, pure and simple, but the complications which may arise from neglect are fraught with danger. And here it may be proper to remark that it is expedient, and especially in long-continued and chronic cases, that the prescriptions should be occasionally varied in order to secure the progressive steps in treatment. I have sometimes suspended a part of the treatment, and then returned to it, after an interval of time, according to the indications present. By changing the prescription, also, we render it less necessary to increase the quantity of a curative agent:

there are some remedies that are entirely forbidden by the constitution of one patient which are most useful in other cases. These cases, of course, can only be judged of by the experience of those who have had such cases under their management.

Now, in gout, we have noticed that hereditary predisposition is one great cause, and that disproportion between the supply and demand of the system is also a most important cause. In gout we must regulate the habits of the patient. If you are suffering from gout, and really wish to get well, you must act in conjunction with your physician in this matter. As an outline of regimen, which of course would need modifications in different cases, gouty persons should eat vegetables; but with regard to meat, they should only take it once a day. Wine and beer are bad for gouty patients, because they retard the transformation of tissue; those who drink wine or beer with meals require less to eat;

persons who may be thin will at times get fat if they take wine or beer regularly, owing to their action as retarders of transformation of tissue. Very few people who do not take wine or beer have gout. Tea and coffee also retard the changes of tissue, and are for this reason not good things for gouty persons. Drinking water aids the change of tissue and the excretion of urea, and is, therefore, useful in these cases. Muscular exercise in the open air aids the change of tissue, and, therefore, is advantageous. Sometimes mineral waters are found to be useful: those of Vichy, Karlsbad, Marienbad, Kissingen, are the principal. Now, there must be discretion in all things, and though attention to the above points is most desirable, yet excessive limitation of nourishment, and suddenly leaving off beer, or spirits, or wine, which may have been used for years, is not good practice. Those who have studied Nature know that she does not like surprises; and I have seen

much harm done by sudden changes, and warn you against making them. I have known cases of acute gout converted into chronic gout by such rapid and vigorous measures. There are cases of gout which require nourishment and wine. Assimilation and excretion must be properly balanced. With regard to using colchicum, great care is required, and especially with regard to the dose; it is better adapted to acute cases, but its prolonged use in chronic cases is now abandoned. We should endeavour to shorten the attack, and to render it as bearable as possible the limb should be elevated, and wrapped in cotton wool. If abscesses form near the joints, poultices may be applied. If the gout disappears from the foot or hand, and thereupon the brain, stomach, or heart are attacked, then immediately cover the former part with mustard-plasters, and give warm brandy and water. Cold applications to the joints must be avoided. A draught of

ten to fifteen grains of carbonate of potash may be given three times a-day, dissolved in half a tumblerful of water, either simply or made to effervesce by means of a little fresh lemon-juice. With regard to colchicum I feel I am doing my duty to you better when I say Don't take it, except under the superintendence of a physician; but if you venture on it all alone, the quantity to be so taken may be ten drops of the colchicum wine twice in the twenty-four hours; this would fill up the interval before advice could be obtained. Lithia has been used in some cases of gout of late years.

Each case, let it be remembered, has its own peculiarities, and demands attention to special points and modifications of the treatment from time to time.

SCIATICA.

This is a very painful affection of the sciatic nerve; it is situated at the back of the thigh. Sometimes the pain is felt down the whole course of this large nerve, and the posterior and outer part of the thigh become very painful. Branches from this main nerve may become affected, and then there may be pain felt on the outer side of the leg, and down its length, and on the top of the foot, and sometimes also along the outer side of the ankle and foot, and also in the heel and the back part of the sole of the foot there may be severe pain felt. Sciatica generally commences gently; there is a sense of continual deep pain at the upper part of the back of the thigh, and also pains in the

back—this constant pain is sometimes exaggerated. One point of inconvenience in sciatica is that the pain frequently comes on when a person has gone to bed, so that it is impossible to remain in bed; sometimes the pains are caused by pressure, and at other times they arise spontaneously. An easy position is to lie with the legs slightly bent. Parts being rendered tense by coughing or sneezing, will often give rise to the pain. The person is observed to walk with great care, so as to avoid any mis-step, or too quick a motion. In chronic sciatica, the limb shrinks in size, and sometimes it seems to result in a form of paralysis. Sciatica is one of those ailments that seems prone to take its time, but, nevertheless, is to be aided by appropriate treatment; in some cases it will last for weeks, and in others for months or years, and will recur. What are the causes of sciatica? It may result from pressure by carious bone, or from growths within

the pelvis, or other sources of pressure. Ovarian cysts in women, confined condition of bowels may cause it; pressure exerted during pregnancy, disordered conditions of the womb; then again, pressure of tight boots, tumors in the course of the nerve, aneurism of the arteries of the thigh, and by excessive straining of the leg or thigh, catching cold, sitting on damp ground. It rarely affects children, but people are subject to it between twenty and sixty, and males are most subject to it. Amongst the remedies which may be tried are purgatives, blisters, rubbing-in liniment, and subcutaneous injection of sedatives. But, the causes being several, and some of them complicated, if it does not quickly yield to some of the above-mentioned means, the case will have a much better chance of a successful issue at the hands of the physician.

As general directions for the promotion of healthy assimilation and excretion, the

importance of which processes the reader will, doubtless, be prepared to admit, I may add that the diet must be proportioned to the state of the stomach, and this must be attended to with reference to the quality of the food, the quantity, and the frequency. It has been said: "Nothing more is requisite for this purpose than to live up to the simplicity dictated by nature, which teaches us to be content with little, to pursue the medium of holy abstemiousness and divine reason, and to accustom ourselves to eat no more than is absolutely necessary to support life; considering that what exceeds this is disease and death, and done merely to give the palate a satisfaction, which, though but momentary, brings on the body a lasting and long train of disagreeable sensations and diseases, and at length kills the soul." You cannot be too attentive to the character of the food, avoiding sweet, luscious, or greasy dishes, pastry, and excess in solids; as to the

frequency of taking food, some persons never give their stomachs any rest, they are always either eating or drinking; others take a really wasteful quantity. Generally the following will form a sufficient quantity of solid food in the day for an adult, I am speaking of the rule; thus:—meat, twelve ounces, bread sixteen ounces, potatoes sixteen ounces, other vegetables eight ounces, milk three ounces. We may remember that people have always suffered more from repletion than inanition.

Exercise, either by walking or on horseback, is a most important item in the management of health; it has been observed that those who are obliged to take regular daily exercise of a certain number of miles, have been more healthy and enjoyed longer life than those who have been neglectful of this. Exercise should be combined with cheerfulness or amusement when possible; the hunting-party is usually a jovial and a healthy one.

Men who have retired from the active pursuits of life, in which exercise was associated with some entertaining end, should be on their guard against sinking into a non-exercising habit; they are sure to fail in health if they give up their daily, regular exercise.

The condition of the bowels should be watched every day, and one healthy daily relief should be secured. There must be a proper amount of sleep also secured, and usually an adult requires eight hours, an elderly person rest in bed for ten or twelve hours, and children up to six years of age twelve hours, and also an hour or more in the middle of the day.

It is a useful guide by which to judge of the health to have a knowledge of the proper weight of the body, and I now give you a table of the weight of the body in connection with the height of the person.

WEIGHT OF BODY.

The following table shows the normal weight in proportion to height. Loss of weight an early symptom of phthisis. A slow and gradual fall, more serious than a rapid and irregular diminution: *a steady loss always precedes tuberculosis* (Dr. Hutchinson) :—

Exact Stature.		Mean Weight.			Weight increased by 7 per Cent.		
Ft.	in.	St.	lbs.	lbs.	St.	lbs.	lbs.
5	1	8	8	or 120	9	2	or 128
5	2	9	0	,, 126	9	9	,, 135
5	3	9	7	,, 133	10	2	,, 142
5	4	9	13	,, 139	10	9	,, 149
5	5	10	2	,, 142	10	12	,, 152
5	6	10	5	,, 145	11	1	,, 155
5	7	10	8	,, 148	11	4	,, 158
5	8	11	1	,, 155	11	12	,, 166
5	9	11	8	,, 162	12	5	,, 173
5	10	12	1	,, 169	12	13	,, 181
5	11	12	6	,, 174	13	4	,, 186
6	0	12	10	,, 178	13	8	,, 190

This reads :—A man of 5 ft. 8 in. should weigh, in his clothes, 11 st. 1 lb. or 155 lb. (14 lb.=1 stone) ; he may exceed this by 7 per cent., and so attain 11 st. 12 lb. or 166 lb., without affecting his vital capacity ; beyond this amount his respiration becomes diminished. According to M. Quetelet the average weight of the clothes at different ages is one-eighteenth of the total weight of male body, and one twenth-fourth of that of female.

Some disorders to which females are especially disposed may be traced to a rheumatic gouty habit; this has long ago been pointed out by physicians highly honoured, and now dead and gone. The disposition to flatulence and hæmorrhoidal congestion, the frequent flushings and migratory pains in different parts of the body—more especially the joints—and the loaded condition of the urine from excess of urea, lithic acid, and lithate of ammonia of such conditions; absence of the menses, and difficulty at that period, are often closely associated with rheumatism.

In such cases the treatment must be directed to set the digestive organs in order. We cannot get on if assimilation and excretion are not in correct working order, and this is especially necessary since the rheumatico-gouty state of system seldom, I may say never, exists without hepatic and gastro - intestinal derangement of some considerable standing, and

also because it is well known that increased activity of the liver greatly assists the kidneys in ridding the system of those morbid principles on which this condition chiefly, if not essentially, depends. A few days in such cases will be advantageously devoted to mild alterative treatment. Two or three-grain doses of the colocynth pill, with hyoscyamus and one or two grains of blue pill combined, may be taken every other night for two or three doses; a mixture of bicarbonate of potass, ten grains, and nitrate of potass, ten grains, with half an ounce of infusion of calumba, may also be taken twice a-day for two or three days. Do not venture too far unguided by a physician, but sometimes in the commencement such measures may restore; but do not let me do harm by tempting you to rely for substantial relief upon that which I only suggest as a time-saver until you can get sound advice; such early treatment not unfrequently goes a long way towards

relieving the sufferings at these periods. There is one local remedy which may sometimes be used in these cases, I have found, with great relief, and that is a suppository of the compound opium and soap pill, eight grains, placed within the lower bowel at bed-time for two or three nights. But though I am desirous of giving some useful information which may relieve from suffering, yet I feel in duty bound to tell you to be very careful indeed not to rely upon any remedies recommended either in this book or any other for cure-purposes—disease is much too complicated to be treated *in extenso* in any such manner, and the honest advice is Do not trust any remedy so prescribed for any length of time, but only use it as a saver of time until good sound advice can be obtained from a physician, and it is better to use these remedies for that purpose than some of the compounds sold as patent medicines, or others advised by amateurs. I have seen

so much mischief done by drugs so taken—strong drastic purgatives and other things—that I feel bound to speak out upon the subject.

In conclusion I will say that I think it would be greatly to the advantage of the public generally, if they would pay a little more attention to the subject of proper medical treatment.

We may well regard the question of the restoration of health as one worthy the attention of each individual. Whether we shall receive a rational care when we are ill, and deprived perhaps of our own intellectual power for a time, and dependent upon the skill and attention of others, cannot be an unimportant question to any one, but on the contrary must be full of interest. Why should we not while we are in health make up our minds upon matters medical, which affect questions of very great importance to us, inasmuch as they concern our life or our death? Why should we not make up our minds upon this matter as well as upon questions of Theology or Politics? There are differences amongst Doctors

as well as among Theologians and Politicians; there are those who in treating disease do nothing but let it go its own way, giving no aid by medicine; these are known as *expectants.* There are others who are *active treaters* of disease, and who bleed and give calomel and antimony and morphia in large quantities, and very fatal in its effects has this kind of treatment very often proved. There are others, with whom the writer agrees, who support Nature during her struggle, aid her by the temperate use of tonic measures, but do not swamp and depress her with the over-use of exhausting and depressing agents, and these are the most successful treaters of disease. One of the best exponents of this rational system of medicine was the late Dr. John Hughes Bennett, Professor of Medicine in the University of Edinburgh, who has clearly shown that his school of treatment was the most successful; and in my own practice, day by day do I find evidence of the successful soundness of the truthful principles which he taught, and thus am I and others who practise upon those principles enabled daily to relieve suffering and prolong and save life.

SOME MEDICAL APHORISMS.

1.

Because the treatment prescribed to-day is suited to the condition of organism present to-day, it does not follow that it will be proper to continue it without some modification to-morrow. This applies to acute cases more particularly.

2.

The treatment of yesterday is not necessarily bad because it is changed to-day; because it has efficiently advanced you a stage towards health, but is unable to advance you further, it has not been inefficient; the good it has accomplished is not the less because it cannot accomplish more; it has done much in advancing you a stage nearer health.

3.

All disease makes a draught upon repairing power; it is therefore well to aid the system during the struggle, that as little destruction as possible may take place.

4.

A prescription is not a "cure-all"; it is merely the direction for the treatment best adapted to aid the organism under its existing stage of ailment.

5.

If a prescription is efficient in its working, it will make a change in the condition of the organism, and, in order that advance may be made, will require to be substituted by other directions better adapted to still further aid the system towards recovery.

6.

Symptoms are the outward expression of hidden organic mischief.

7.

Symptoms are not to be *treated*, they are to be *translated*; that is, to be traced to their deeper origin, to the faulty organ or organs; and that faulty structure is to be treated, and so the symptom will be removed.

8.

The same symptom may have several significations, according as it may be modified by combination with other symptoms, or by age, constitution, or sex.

9.

Disease is active, and in progress during the *night* as well as the day; nurses should remember this. Many people die in the night from *neglect.*

10.

Strong food is not always the most nutritious—we are not nourished by what we put into the stomach; it is what our systems are able to appropriate of that which we put in that strengthens us. This applies to invalids' diet. People often die *after* typhoid fever from indiscretion in diet.

11.

Cold is a depressant as well as heat. Cold is not always a tonic.

12.

Children are often weakened instead of "hardened" by injudicious exposure to cold, and by scanty clothing.

13.

A frequent action of the bowels does not disprove the necessity for relieving them completely by medicine; frequently Nature is attempting a relief which she cannot *unaided* accomplish.

14.

Nature works by combining organs in action, *whether in health* or disease.

15.

Many errors arise in treating disease as if one organ alone were affected—this is an *artificial* view, it is not true to Nature.

16.

Drugs are as potent for life or death as the knife, and require quite as much skill in the use—they are too frequently deputed in their use, and the patient *cuts* himself with them to his own hurt.

17.

The use of medicine is to restore tone—the abuse or over-use of medicine will destroy tone. The same as in exercise; exercise is strengthening, *over*-exercise is weakening.

18

No one is ever better for an illness—*relatively* the condition of health may be better after the illness is over than during the "sickening" for an illness, or than during the full height of the illness—but *positively* the organism would have been less broken down if illness had never accrued. Be as little ill as possible.

19.

It is well to modify and shorten illness, and so

save the tissues of the several organs from being "used up," and so leaving less to prolong life with.

20.

Every illness "ages" a man, it expends his health-*capital.* The commercial motto applies here—"Cut short your losses."

21.

In cases where perfect restoration cannot be obtained, yet rapid destruction may be retarded by medical assistance.

22.

Careful analysis of the case should always precede prescription; this involves time being spent, and this involves a non-monopoly by a few practitioners, and a distribution of the medical work to be done amongst a large number of practitioners, as it is impossible for a few men to do the medical work of the community with that care and exactness which are so desirable—a distribution of labour must exist in this department of work, as in others.

23.

That "A stitch in time saves nine" is true in medicine as elsewhere.

24.

Bathing will agree with all (with very few exceptions), but the *same mode of bathing* is not equally suited to all.

25.

Exercise is not *over-work.*

26.

Exercise strengthens—*over-work* weakens.

27.

Greater exactness and care in analysing the condition of the organism, in tracing symptoms home to their pathological sources, and then greater exactness in knowledge of the affinities between parts of organism and drug restorers, are now within reach of the invalid; thus disordered conditions can be more successfully relieved and cured than formerly.

28.

Though it may be said "A fever cannot be cured," yet a person, by proper medical care, can be saved from dying by one of the many complications which arise in the course of fever.

29.

Other diseases have often, from inexactness, been called "Consumption."

30.

"Consumptive disease" has progressive stages, and more can be done in staying its progress than was thought to be possible formerly.

31.

Sharp, off-hand prescribing, without careful examinations, by means suitable to the nature of the case, which may appear very shrewd, knowing, and clever, is by no means always the most advantageous to the patient; sometimes latent disease is left thus at the remedial period undiscovered and untreated.

32.

Many allow lung disorder to progress insidiously from objecting to have "the chest sounded," and condemn the physician as "fussy" who endeavours by careful examination to do his duty, and so throw impediments in his way to find out "what is the matter," and also act to their own disadvantage.

33.

Continued circulation of imperfectly formed or deficiently purified blood must, before long, deteriorate the organism of the body; inferior or impure blood only indifferently keeping up the tone

of the organs, and this inferior tone of the various organs again only furnishing inferior blood. So working in a circle gradually on to destruction.

34.

Some principal points of comfort to the invalid are :—

First. To know that drugs are given which are known to reach affected parts, and are capable of restoring them.

Second. To feel confident that large and excessive doses of *depressing* drugs (antimony), and stupefying drugs (morphia and opium), and *exhausting* drugs (drastic purgatives) will not be given.

Third. To know that efficient remedies, known not hypothetically, but by the confirmation of long experience, to be useful, both internal and external, also, if needful, will be used, and that disease will not be left to struggle on by itself, but that *aid* will be resorted to according as it may be needful.

35.

With reference to *domestic medicine* :—Sometimes valuable lives have been sacrificed, and in other instances contagion has spread through fami-

lies, from too confident reliance upon "domestic medicine." "*When I think anything serious is the matter I should not think of treating it. I should send for the doctor!*" But sometimes disease is "*sly*" and *is* serious, though to one not well acquainted with it there appears to be no reason to *think* it so. When in reach of "the Doctor," it is better to send for him than to start off diarrhœa in the first week of typhoid, for instance, by an injudicious dose or two of "mild opening medicine," "because *I thought that could do no harm*," &c., &c.

36.

Don't let what you don't know contradict what you do know.

37.

Carefully consider the difference between the powers of the words *always*, *never*, and *sometimes*, and *all*, *none*, and *some.*

38.

"Things which are equal to the same thing are equal to one another."

39.

"The whole is greater than its part."

40.

In human affairs, when we cannot expect *cer-*

tainty, we shall do wisely to avail ourselves of the *greatest probability.*

41.

There is a difference between *hypothesis* and theory; and frequently when people say they object to anything *theoretical*, or that they "prefer something practical," they mean they dislike the *hypothetical.*

Theory is distinguished from hypothesis, thus:—a theory is founded on inferences drawn from principles which have been established on independent evidence. Hypothesis is a proposition *assumed without evidence* to account for certain phenomena. Theory is the philosophical explanation, *founded on evidence*, of certain phenomena.

42.

Both *prejudice* and *enthusiasm* will be held in check in a well-ordered mind.

43

Persons who "have *always* succeeded with this measure," and "have *never* failed" with something else, will *sometimes* be found to be in error.

44.

Like is not equivalent to *same.*

"The wisdom of life consists of commonplaces, which we should all be much better for working into our practice, instead of complacently sneering at them as platitudes. Horace abounds in commonplaces, and on no theme more than this. He has no divine law of duty to appeal to, as we have —no assured hereafter to which he may point the minds of men; but he presses strongly home their folly in so far as this world is concerned. To what good, he asks, all this turmoil and disquiet? No man truly possesses more than he is able thoroughly to enjoy. Grant that you roll in gold, or, by accumulating land, become, in Hamlet's phrase, 'spacious in the possession of dirt.' What pleasure will you extract from these, which a moderate estate will not yield in equal, if not greater, measure? You fret yourself to acquire wealth—you fret yourself lest you should lose it. It robs you of your health, your ease of mind, your freedom of thought and action. Riches will not bribe inexorable death to spare you. At any hour that great leveller may sweep you away into darkness and dust, and what will it then avail you, that you have wasted all your hours, and foregone all wholesome pleasure, in adding ingot to ingot, or acre to acre, *for your heirs* to squander? Set a bound, then

to your desires: think not of how much others have, but of how much which they have you can do perfectly well without. Be not the slave of show or circumstances, 'but in yourself possess your own desire.' Do not lose the present in vain perplexities about the future. If fortune lowers to-day, she may smile to-morrow; and when she lavishes her gifts upon you, cherish an humble heart, and so fortify yourself against her caprice. Keep a reign upon all your passions—upon covetousness above all; for once that has you within it clutches, farewell for ever to the light heart and the sleep that comes unbidden, to the open eye that drinks in delight from the beauty and freshness and infinite variety of nature, to the unclouded mind that judges justly and serenely of men and things. Enjoy wisely, for then only you enjoy thoroughly. Mar not your life by a hopeless quarrel with destiny. It will be only too brief at the best, and the day is at hand when the inequalities will be redressed, and king and peasant, pauper and millionaire, be huddled, poor shivering phantoms, in one undistinguishable crowd, across the melancholy Styx, to the judgment-hall of Minos."*

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* "Horace," by Theodore Martin, in Ancient Classics for General Readers.





